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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant:	Rubin, Richard	)	
Serial No.:	09/664,885	)	Ex: Pascua
Filed:	19 September 2000	)	Art Unit: 3727
For:	INSULATED FOOD CONTAINER	)	

CERTIFICATION OF FACSIMILE TRANSMISSION

Mail Stop AMENDMENT  
Commissioner for Patents  
P.O. Box 1450  
Alexandria VA 22313-1450

Dear Sir:

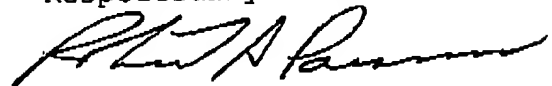
I hereby certify that this correspondence, consisting of Amendment Transmittal Form; and Amendment and Response to First Office Action, fifteen (15) pages is being facsimile transmitted to the Patent and Trademark Office (Fax. No. 703-872-9306) on the date shown below.

Lee Edman  
Signature

24 November 2004

24 November 2004  
Date

Respectfully Submitted,



Robert A. Parsons  
Attorney for Applicant  
Reg. No. 32,713

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# PARSONS & GOLTRY

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## Fax Cover Sheet

DATE: November 24, 2004 TIME: 9:00 AM  
TO: EXAMINER PASCUA  
ART UNIT 3727 PHONE:  
FAX: 703-872-9306  
FROM: ROBERT A. PARSONS  
Parsons & Goltry PHONE: 602-252-7494  
FAX: 602-252-7198  
RE: 09/664,885; RUBIN; INSULATED FOOD CONTAINER

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NOV 24 2004

Number of pages including cover sheet: 18

Confirmation Copy to follow? ☒ No ☐ Yes

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Message

Applicant: Rubin, Richard )  
 Serial No.: 09/664,885 ) Ex: Pascua  
 Filed: 19 September 2000 ) Art Unit: 3727  
 For: INSULATED FOOD CONTAINER )

Mail Stop AMENDMENT  
 Commissioner for Patents  
 P.O. Box 1450  
 Alexandria, VA 22313-1450

Sir:

Transmitted herewith is an amendment in the above identified application.

- ☒ Small entity status is claimed by client  
☐ Design Application, no additional fee required.  
☒ Utility application, fee calculated on table below.

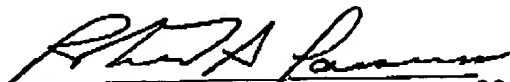
The fee has been calculated as shown below:

	Claims Remaining After Amendment	Highest No Previously Paid For	Present Extra	Small Entity	Large Entity
TOTAL	10 -	20	0	X 9 = \$0	or X 18 = \$
INDEP	3 -	3	0	X 44 = \$0	or X 88 = \$
MULTIPLE DEPEND CLAIM PRESENTED				X150 = \$0	or X300 = \$
				TOTAL \$	or TOTAL \$

- Please charge the Deposit Account No. \_\_\_\_\_ in the amount of \$ \_\_\_\_\_.  
 — The Commissioner is hereby authorized to charge any additional fees which may be required, or credit any overpayment to Deposit Account No. \_\_\_\_\_.  
 — A duplicate copy of this transmittal sheet is enclosed.  
 — A check in the amount of \$ \_\_\_\_ is attached.

Respectfully submitted,

11/24/04  
 DATE

  
 Robert A. Parsons, Reg. No. 32,713  
 CUSTOMER NUMBER 29370

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**AMENDMENT AND RESPONSE TO FIRST OFFICE ACTION**

Mail Stop Non-Fee Amendment  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Dear Sir:

This is in response to the Office Action mailed 25 August 2004 in the above identified patent application. A shortened statutory period for response was set for 3 months, up to and including 25 November 2004.

Claims 1-20 are pending in the application.

Claims 1-20 stand rejected.

Reconsideration is respectfully requested in view of the following remarks.